

## About the National GAINS Center

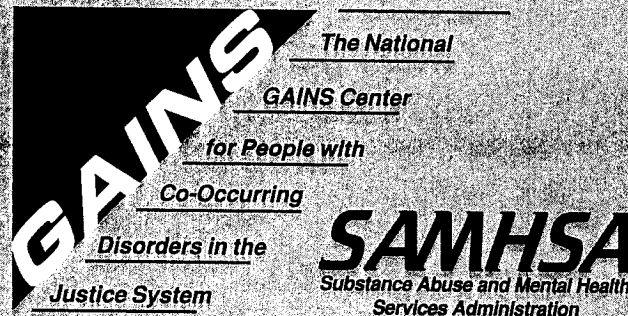
The GAINS Center is a national locus for the collection and dissemination of information about effective mental health and substance abuse services for people with co-occurring disorders who come in contact with the criminal justice system.

The Center gathers information designed to influence the range and scope of mental health and substance abuse services provided in the justice system, tailors these materials to the specific needs of localities, and provides technical assistance to help them plan, implement, and operate appropriate, cost-effective programs.

**For more information** about the GAINS Center, its activities, resources, and the availability of technical assistance, contact us at:

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*The National GAINS Center for People with Co-Occurring Disorders in the Justice System is a national center for the collection and dissemination of information about effective mental health and substance abuse services for people with co-occurring disorders who come in contact with the justice system. The GAINS Center is a partnership of the Substance Abuse and Mental Health Services Administration's two centers – the Center for Substance Abuse Treatment (CSAT) and the Center for Mental Health Services (CMHS) – and the National Institute of Corrections, the Office of Justice Programs and the Office of Juvenile Justice and Delinquency Prevention. The GAINS Center is operated by Policy Research Associates in collaboration with the Florida Mental Health Institute (FMHI), the University of Maryland's Center for Behavioral Health, Justice and Public Policy and R.O.W. Sciences, Inc.*



# SCREENING AND ASSESSMENT OF Co-Occurring Disorders IN THE JUSTICE SYSTEM

### ***What are co-occurring disorders and how do they affect the justice system?***

The term co-occurring disorder describes the simultaneous presence of substance abuse or dependency and a mental health disorder.

Co-occurring disorders are significant to the criminal justice system because people in community corrections, jail, and prison settings have a much higher rate of co-occurring disorders than in the general population.

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***An estimated 5 to 13 percent or about 500,000 individuals in correctional settings have co-occurring mental health and substance use disorders at any given time.***

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When people with co-occurring disorders enter the justice system they present special challenges to corrections staff and service providers who are often trained to identify either mental illness or substance abuse, but not both.

To be responsive to these needs, staff and providers must be able to detect signs and symptoms of co-occurring disorders, understand the complicated symptom presentation, use integrated screening and assessment instruments, and learn strategies to enhance the accuracy of information described during interviews.

### ***What are screening, diagnosis, and assessment and how are they used?***

Screening is typically conducted early in the information collection process. The goals of screening include identifying:

- Current mental health and substance use disorders
- A history of violent offenses/behavior or severe medical problems
- Severe cognitive deficits
- Individuals who are not amenable for treatment of co-occurring disorders

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Diagnosis summarizes the pattern of current symptoms and provides hypotheses for further assessment and treatment. Diagnosis helps to determine how treatment will focus on mental health disorders and substance abuse disorders. Goals of diagnosis are to:

- Identify the presence of specific mental health and substance use disorders
  - Develop strategies for psychosocial assessment
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Assessment provides a comprehensive examination of psychosocial needs and problems, such as the severity of mental health and substance abuse disorders and the conditions associated with the occurrence and maintenance of these disorders. The goals of assessment are to:

- Examine the scope of mental health and substance abuse problems
- Identify other psychosocial problems that may need to be addressed in treatment
- Provide a foundation for treatment planning

**What information should be included when screening for co-occurring disorders and at what stages should screening be conducted in the justice system?**

An integrated screening approach should be used to examine relevant criminal justice information, and to determine the presence of mental health and substance use disorders. Evidence of substance abuse or mental health problems is used in most criminal justice systems to identify individuals who need more extensive assessment to determine the type or intensity of specialized treatment services that will be provided.

Due to time constraints, screenings conducted in most criminal justice settings need to be brief. The following are guidelines for when screening should be conducted and who should be screened:

- **All individuals** entering the justice system should be screened for both mental health and substance abuse disorders.
- Screening for mental health and substance abuse problems should be completed at the **earliest possible point** after involvement in the criminal justice system.
- Screening for co-occurring disorders should be provided at **different stages** of a person's progression through the criminal justice system, such as diversion, admission to jail, pretrial, presentencing, sentencing, probation, revocation hearings, admission to prison, parole, and aftercare.
- Similar or **standardized screening instruments** for co-occurring disorders should be used across different justice settings.
- To obtain the most accurate results, screening for co-occurring disorders should be delayed until an individual reaches **sobriety**.
- Information from previously conducted screening and assessment should be **communicated across different points** in the criminal justice system.

Key elements of screening should include the following information:

**Criminal justice history** including prior felonies, aggressive or violent behavior, and the most recent offense of record.

**Mental health history** such as symptoms, family history of mental illness, recent trauma such as physical or sexual abuse, and prior involvement in mental health treatment.

**Substance abuse observations** such as signs of acute drug or alcohol intoxication or withdrawal, drug tolerance effects, self-reported substance abuse, prior involvement in treatment, and family history of substance abuse.

**Suicide risk** should be examined and included in all mental health and substance abuse screenings. A suicide screening should be included when an individual is transferred between different stages in the justice system or to new institutions.

**Other indicators** that should be considered include the presence of infectious disease and motivation and readiness for treatment.

***What information should be included in an assessment of co-occurring disorders?***

Assessment of co-occurring disorders is usually accomplished after completion of screening and referral to treatment services. If symptoms of both mental health and substance use disorders are detected during screening, the assessment should examine potential interactive effects of these disorders.

***Assessment of co-occurring disorders should include: an examination of skill deficits, the need for psychotropic medications, and types of treatment that are needed.***

Standardized assessment methods should be implemented at an early stage and throughout involvement in the justice system. The following key elements should be included in an integrated assessment of co-occurring disorders:

- Symptoms of co-occurring disorders
- Substance abuse history and status
- Mental health history and status
- History of interaction between co-occurring disorders
- Social relationships
- Medical/health care history and status
- Criminal justice history and status

***What instruments should be used to detect co-occurring disorders?***

Currently, no instruments have been developed to specifically screen or assess co-occurring disorders. Instead, several independent mental health and substance abuse instruments should be combined for this purpose. Instruments should be reliable, valid in detecting mental health, substance abuse and other related problems, and optimally should have a proven record of use in criminal justice settings.

Formal screening and assessment instruments should be supplemented whenever possible by an individual interview, drug testing, record review, and information from collateral informants. More specific information about screening and assessment protocols and technical instruments can be found in the paper listed below.

This brochure is based on information from a monograph developed for the GAINS Center entitled "Screening and Assessment of Co-Occurring Disorders in the Justice System," by Roger H. Peters, Ph.D., and Marla Green Bartoi, M.A., of the Louis de la Parte Florida Mental Health Institute (FMHI) at the University of South Florida in Tampa.

A copy of this paper can be obtained by contacting the GAINS Center.